

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/578104

FILING DATE

17 APR 2007

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/			
2	/		/			
3	/		/			
4	/		/			
5	/		/			
6	5		/			
7	5		/			
8	5		/			
9	5		/			
10	5		/			
11	5		/			
12	5		/			
13	5		/			
14	/		/			
15	/		/			
16	/		/			
17	/		/			
18	/		/			
19	5		/			
20	5		/			
21	5		/			
22	4		/			
23	4		/			
24	4		/			
25	4		/			
26	11		/			
27	1		/			
28	10		/			
29	10		/			
30	1		/			
31	/		/			
32	/		/			
33	/		/			
34	/		/			
35	/		/			
36	5		/			
37	5		/			
38	5		/			
39	5		/			
40	5		/			
41	5		/			
42	5		/			
43	5		/			
44	/		/			
45	/		/			
46	/		/			
47	/		/			
48	1		/			
49	5		/			
50	5		/			
TOTAL IND.	2		2			
TOTAL DEP.	170	←	58	←		
TOTAL CLAIMS	172		60			

	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	5		/			
52	4		/			
53	4		/			
54	4		/			
55	4		/			
56	0		/			
57	1		/			
58	0		/			
59	0		/			
60	1		/			
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95						
96						
97						
98						
99						
100						
TOTAL IND.			↓			
TOTAL DEP.		←		↓		
TOTAL CLAIMS		←		↓		